**IMPLEMENTING INSTRUCTION-EPI-**

**AUDIT OF CASE REPORTS PROTOCOL**

(individual records)

Completed by Reginal Epidemiologists

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**Purpose**

As many individuals are involved in disease surveillance activities at the local health departments, this implementing instruction is to establish guidelines for the review of disease reports to identify and control potential disease outbreaks.

**Scope**

This policy shall apply to all LHD personnel who have been assigned responsibility for disease surveillance.

**Guidelines for Reviewing Disease Reports**

* A Public Health Nurse (PHN) will review all disease reports received
* Reports may be communicated directly to the LHD via telephone, facsimile, mail, or other form of communication
* Reports may be received electronically through ODRS
* The PHN will initiate contact with the patient and/or the patient’s health care provider (physician, lab, hospital, or clinic)
* To ensure appropriate treatment has been provided to the patient
* Determine if contacts of the patient are also in need of notification and/or treatment
* Evaluate if any further public health actions are necessary
* ODRS data entry
* All pertinent information will be entered into ODRS
* ODRS will be reviewed locally and regionally by the PHEP Epidemiologist to assess whether there are other related cases and if further follow up is necessary
* The following standards and rules will be referenced and followed:
* The Ohio Department of Health, Infectious Disease Control Manual <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/infectious-disease-control-manual/section3/>
* Disease specific guidelines;
* Provides guidance including prevention, control and reporting of suspected and diagnosed cases of contagious diseases; and
* Outlines public health actions.
* Ohio Administrative Code 3701-3-02 and 3701-3-13
	+ Diseases to be reported; and
	+ Isolation requirements.
* In order to assure accuracy and completion of data entry, audits will be completed by the PHEP Epidemiologist
	+ The number of audits completed is based on the number of diseases reported to LHD during the calendar year.
		- 2% of disease reports will be audited with no less than 1 audits being completed.
	+ Audited information is based in the “Key Reporting Information” and “Case Investigation” sections for the disease specific entry in the IDCM.
	+ The Audit Form can be found on the next page.



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